Women not under MFM care birthed in Dec 2018 by day and DHB

		ADHI	В	Non-A	DHB		
Day	, Number		%	Number	%		Grand Total
1		12	66.7%	6		33.3%	18
2		6	46.2%	7		53.8%	13
3		9	64.3%	5		35.7%	14
4		10	62.5%	6		37.5%	16
5		10	71.4%	4		28.6%	14
6		14	82.4%	3		17.6%	17
7		17	77.3%	5		22.7%	22
8		8	66.7%	4		33.3%	12
9		3	42.9%	4		57.1%	7
10		12	60.0%	8		40.0%	20
11		12	75.0%	4		25.0%	16
12		13	72.2%	5		27.8%	18
13		16	80.0%	4		20.0%	20
14		15	75.0%	5		25.0%	20
15		9	75.0%	3		25.0%	12
16		7	46.7%	8		53.3%	15
17		14	60.9%	9		39.1%	23
18		7	50.0%	7		50.0%	14
19		12	54.5%	10		45.5%	22
20		15	65.2%	8		34.8%	23
21		13	72.2%	5		27.8%	18
22		8	61.5%	5		38.5%	13
23		13	68.4%	6		31.6%	19
24		9	60.0%	6		40.0%	15
25		5	83.3%	1		16.7%	6
26		10	83.3%	2		16.7%	12
27		12	66.7%	6		33.3%	18
28	•	17	73.9%	6		26.1%	23
29		11	78.6%	3		21.4%	14
30		9	81.8%	2		18.2%	11
31		9	60.0%	6		40.0%	15
Gra	nd		67 40/	4.60		22.53/	
Tot		337	67.4%	163		32.6%	500

Non-domicile women not under MFM care birthed in Dec 2018 by Mode of birth

Mode of birth	Number
CS	78
OV	19
SV	66
Grand Total	163

Non-domicile women not under MFM care birthed in Dec 2018 by LMC at Delivery

DHB	Number
Auckland Obstetric Centre (AC	C) 14
Birthright	28
Community	17
Diabetic	5
Independent MW	61
Maternal Fetal Medicine	2
Medical	5
Origins	11
Other DHB	1
Private Obstetrician	17
unbooked	2
Grand Total	163

Non-domicile women not under MFM care birthed in Dec 2018 by DHB

DHB	Number
Bay Of Plenty	1
Canterbury	1
Counties Manukau	76
Northland	3
Unknown	1
Waikato	1
Waitemata	80
Grand Total	163



Memo			MANATŪ HAUORA
Date:	25 March 2019		
То:	Clare Perry, Group Manager, Health Sys	tem Improvement	-9
From:	Bronwen Pelvin, principal Advisor, Mater	nity	70,
Subject:	Letter for ADHB re non-resident women	giving birth in ADHB facilities	~
For your:	Action	6	20
that they "deveresponse to A of obstetrician and resources		naternity booking process". This by to manage the practices of a least on the use of operating theat	was in large group atres, staff
Auckland City data ADHB su identified wom maternity serv only ADHB ca	further compounded by the number of wom Hospital. Some days this makes up 50% of applied to demonstrate the numbers involved then who are not in Auckland City hospital begices (Maternal Fetal Medicine, neonatal interprovide. This data shows the majority of w Waitemata DHBs.	the babies being born. I have a d. To the best of their ability, AD ecause they require the level of tensive care or other specialist se	appended the DHB have tertiary ervices) that

Auckland DHB continues to suffer significant midwifery and other workforce shortages to the point that they are very concerned about the safety of the staffing levels and the actual health and safety of their staff. They think that if ADHB was managing only the women domiciled in ADHB's catchment, it would make the situation easier.

They have requested a further, more specific letter from us regarding their 'requirement' to provide care to women from other districts based on the theoretical concept of those women 'choosing' to give birth at an ADHB facility. We are aware that that choice may well be directed by the LMC who only works at ADHB. The LMCs involved in this practice are both obstetricians and midwives.

I have worked with Phil Knipe to develop the letter and he has signed it out.

Page 1 of 1		
1		
Bronwen Pelvin Principal Advisor, Maternity		
Signature	Date:	
Many thanks		
Please approve and sign the audit trail and I will forward to	o ADHB.	